ABSENTEE BALLOT APPLICATION					
NAME:	P.O. BOX 237				
PHYSICALPHONE: ( )	760-932-5531				
ADDRESS TO SEND BALLOT TO (IF DIFFERENT THAN MAILING ABOVE)					
SIGNATURE	TYPE OR PRINT NAME DATE				
SIGNATURE	TIPE ON PRINT NAME				
Deadline: May 25, 2007					

ABSENTEE BALLOT APPLICATION						
NAME MAILI			MONO COUNTY ELECTIONS DIVISION P.O. BOX 237 BRIDGEPORT, CA 93517			
PHYSICA PHONE: ( )		FAX: 760-932-5531				
ADDRESS TO SEND BALLOT TO (IF DIFFERENT THAN MAILING ABOVE)						
	SIGNATURE	TYPE OR PRINT NAME		DATE		
Dea	adline: May 25, 200	· <mark>7</mark>				